

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	25/06/2020 11:35
Date Of Accident	23/06/2020 12:20
Exact Location Of Accident	CTE TOWARDS AYE BEFORE BUKIT TIMAH EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG5878R
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	2XXXXX651D
Email Address	ELDRIN.ALKHATTAB@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81816923
Alternative Phone No	OFFICE-81816923

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	20-ML000245-R00
Cover Note Number	

Driver

Name of Driver	MUHAMMAD ELDRIN BIN RAHMAT
NRIC No	SXXXX171H
Date Of Birth	02/10/1992
Occupation	OUTDOOR
Date Of Driving Pass	14/03/2013
Driving Experience	7 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81816923
Fax Number	
Contact Number	OTHERS-81816923
Email Address	ELDRIN.ALKHATTAB@GMAIL.COM

Address	BLK 134 BEDOK RESERVOIR ROAD #08-1229
Postcode	470134
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	DRIZZLING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	3
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 30 BEDOK NORTH ROAD , POSTCODE: 469676 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2449999 - FAX NO: 62447258
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT T/20200623/2129 (TYPE OF COLLISION IS HEAD TO SIDE)

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	NOT CAPTURED
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GY3682Y
Vehicle Make/Model/Colour	NISSAN CABSTAR
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	TAN KUM HAN
NRIC/Passport Number	SXXXX402I
Contact Number	
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKZ6171H

Vehicle Make/Model/Colour VOLVO

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver HO BIN JOO

NRIC/Passport Number SXXXX962C

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name MUHAMMAD ELDRIN BIN RAHMAT

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle? GBG5878R

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

Accident Sketch Plan

SKETCH PLAN

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4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false report may be referred to the Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and this copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

E. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may be permitted to collect, use, disclose and/or process my personal data/personal information set out in this form and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurers) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers", the Insurers' law/loss/claim firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:

(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

(ii) investigating the accident and/or my claims;

(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

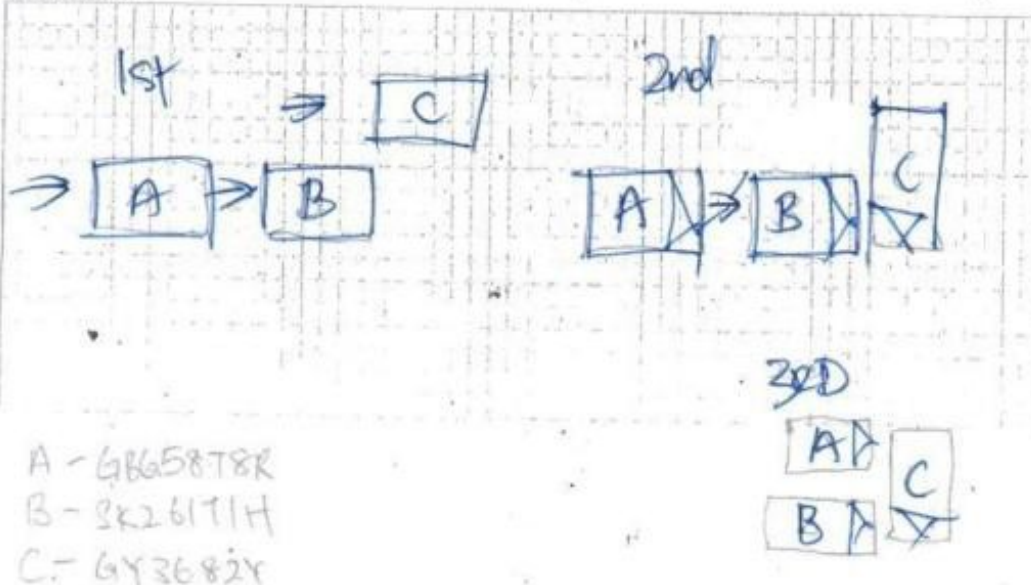
(v) complying with applicable law in administering, processing, handling and/or dealing with my claims, (collectively the "Purposes").

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law/loss/claim firms, may be permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(c) my Personal Information may be disclosed by any of the Insurers, or GIA to their third party service providers or agents (including their law/loss/claim firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature (Date & Time)  25/06/2020
 Insurer's Signature (If driver is not the policyholder) (Date & Time) 
 Witnessed by Reporting Centre Personnel

Sketch Plan



Accident Sketch Plan

Describe Circumstance of the Accident *

On 23/06/2020 at about 1220 hours, I was driving my Toyota Dyna bearing vehicle registration number GBG 5878R along CTE towards AYE before Bukit Timah Exit. I was driving on the third lane when I observed that a Toyota Cabstar bearing vehicle registration number GY 3682Y which was driving on the 4th lane had lost control and the vehicle ended up turning right to block off my lane. As such, it had caused a blue Volvo bearing vehicle number SKZ6171H to collide onto it as it was unable to stop in time. As I wanted to avoid collision, I tried to filter left but my vehicle had collided the rear left side of the Volvo and eventually colliding with the Cabstar before coming to a stop. At that point of time, no one required medical attention. We managed to exchange particulars and made our own way. I wish to state that my vehicle had to be towed away. Subsequently, I felt pain at my right wrist, right knee and right toe. As such I went to Singapore General Hospital and I was issued with 5 days MC (23/6 - 27/6). I wish to add that my vehicle had an iCar camera but the workshop was unable to retrieve the footage.

Police T/20200623/2129

Declaration

I/We declare the foregoing particulars are true in every respect.


Policyholder's Signature




Driver's Signature of driver is not the policyholder

Date & Time


25/06/2020
Witnessed by Reporting Officer

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20200623/2129

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

1 of 4

Report No: T/20200623/2129

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/06/2020 23:53	Vide Report No.:	Station Diary No.: 87
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Informant's Particulars

Name of Informant: MUHAMMAD ELDRIN BIN RAHMAT	Address: APT BLK 134 BEDOK RESERVOIR ROAD #08-1229 SINGAPORE 470134		
ID Type / ID No.: NRIC NO / S9235171H	Contact No.: Home/Office: Mobile: 81816923		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 27	Date of Birth: 02/10/1992	Type of Informant: Driver
Race: Malay	Language: English		Institution / School Name:
Occupation: Driver	Driving Licence Information: Class: 2B, 2A, 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 23/06/2020 12:20	Type of Location: Straight Road
Location: Along Road 1 CENTRAL EXPRESSWAY TOWARDS AYE BEFORE BUKIT TIMAH EXIT				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBG5878R	Lorry	TOYOTA	DYNA	Silver	Seriously Damaged	0
GY3682Y	Lorry	NISSAN	CABSTAR	Silver	Slightly Damaged	0
SKZ6171H	Car	VOLVO		Blue	Seriously Damaged	0

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20200623/2129

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Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

Report No. T/20200623/2129

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MUHAMMAD ELDRIN BIN RAHMAT	ID No.	S9235171H
Related Vehicle	GBG5878R (Lorry)	Contact No.	81816923
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	23/06/2020	Date Discharge	23/06/2020
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Driver			
Name	TAN KUM HAN	ID No.	S0735402I
Related Vehicle	GY3682Y (Lorry)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	HO BIN JOO	ID No.	S7007962C
Related Vehicle	SKZ6171H (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 23/06/2020 at about 1220 hours, I was driving my Toyota Dyna bearing vehicle registration number GBG5878R along CTE towards AYE before Bukit Timah Exit. I was driving on the third lane when I observed that a Toyota Cabstar bearing vehicle registration number GY3682Y which was driving on the 4th lane had lost control and the vehicle ended up turning right to block off my lane. As such, it had caused a blue Volvo bearing vehicle registration number SKZ6171H to collide onto it as it was unable to stop in time. As I wanted to avoid collision, I tried to filter left but my vehicle had collided the rear left side of the Volvo and eventually colliding with the Cabstar before coming to a stop.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20200623/2129

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Police Station Of Origin;
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

Report No. T/20200623/2129

CONTINUATION OF REPORT

At that point of time, no one required immediate medical attention. We managed to exchange particulars and made our own way. I wish to state that my vehicle had to be towed away. Subsequently, I felt pain at my right wrist, right knee and right toe. As such, I went to Singapore General Hospital and I was issued with 5 days MC (23/6 - 27/6)

I wish to add that my vehicle had an in-car camera but the workshop was unable to retrieve the footage.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20200623/2129

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Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

Report No. T/20200623/2129

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

G /

Sgt 3 KHAIRI YAHYA BIN MOHD SANI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

23/06/2020 23:53

Officer In Charge Of Case:

TP / AEIT /

SI ANG YI TING, STEPHANIE

Contact No.: 65476414

Classification Of Case:

Authentication Stamp

NP168

SERIAL

ACCIDENT SCENE



25/06/2020

ACCIDENT SCENE



24/6/2020

ACCIDENT SCENE



25/06/2020

ACCIDENT SCENE



Car 25/06/2020

ACCIDENT SCENE



an 25/06/2020

ACCIDENT SCENE



gmr/25/06/2020

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
 6 Raffles Quay #18-00 Singapore 048580
 Tel (65) 6224 0010 Fax (65) 6224 0030
 Operating Hours : Monday to Friday, 09:00 – 17:00
 UEN: S44550820G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MUA120054312 Vehicle Registration No: 4BG 5878R
 Name (as shown in NRIC) : MUHAMMAD ELORIN BIN RAHMAT NRIC/FIN/Passport No : 5XXXx17141
 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
 Address : _____ Singapore ()
 Contact (Tel) : _____ Mobile No. : 81816923
 Email Address : _____
 Date of Accident : 23/06/2020 Time of Accident : 12:20
 Place of Accident : CTE TOWARDS OYE BEFORE BUKIT TIMAH EXIT
 Insurance Company : TOKIO MARINE

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

To change from T/P to old CLAIMS



Policyholder / Driver's Signature
 Date:

Reporting Centre Personnel's Signature
 Name: Rosa
 NRIC/FIN No.: 60707/2020
 Date:

Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S665500206 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MMA12005431201 Vehicle Registration No: GBG 5878R
Name (as shown in NRIC) : Muhammad ELIAS bin Rahman NRIC/FIN/Passport No : SXXXX 1714
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore ()
Contact (Tel) : _____ Mobile No. : 88716923
Email Address : _____
Date of Accident : 23/06/2020 Time of Accident : 12:20
Place of Accident : 7th Tower NYS Before BT Jomart Exit
Insurance Company : Tokio Marine

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

FROM OWN DAMAGE CLAIM TO THIRD PARTY CLAIM



Policyholder / Driver's Signature
Date:

28/07/2020
Reporting Centre Personnel's Signature
Name: W. A. A. S.
NRIC/FIN No.:
Date: